

## Exploring the Criminal Justice/Mental Health Intersection Project Stanislaus County Community Forum Summary

**Project Background:** The Mental Health Services Oversight and Accountability Commission (MHSOAC) is exploring how California serves justice-involved adults with mental health needs. The goal of this project is to reduce the number of individuals with mental health needs who become involved with the criminal justice system, and improve outcomes for those in custody.

To support this project, the MHSOAC is facilitating a series of public hearings and public engagement meetings, and conducting site visits to understand challenges and solutions, identify needs and gaps, and explore opportunities to build on past and present initiatives with similar objectives.

**Community Forum:** The first community forum was held on December 9, 2016 in Modesto in Stanislaus County; a medium-size county in California's Central Valley. The purpose of the forum was to have a conversation with members of the community, public safety, behavioral health and others to explore needs and gaps, identify prevention efforts that could reduce the number of persons with mental health needs in the justice system, and identify possible solutions for breaking the cycle of incarceration by promoting recovery. Attendees included members of the community, advocates, providers, county representatives, Commissioners and project staff.

County representatives provided an overview of services currently offered in the county for those with mental health needs who become involved in the criminal justice system. Panelists from the community then shared their experiences with the mental health and criminal justice systems, and public safety panelists described the challenges and opportunities for the criminal justice system in responding to the complex needs of those with mental illness.

There was a general sense from participants at the Forum that the number of persons with mental health needs and substance use, and those that are homeless, is increasing faster than ever before in their communities. County leaders described a ten-year effort called *Focus on Prevention*, aimed at understanding the root causes of problems and the systemic challenges in the county using results-based accountability to achieve common goals and outcomes. As part of this effort, the county is developing indicators to demonstrate progress.

The forum resulted in discussions among community members on needs and gaps in the system, community priorities for addressing unmet needs and reducing justice involvement, and what community members could do to make an impact. These discussions are summarized below.

### Needs and Gaps

Family member panelists described the challenges of managing mental illness; loved ones become stabilized for periods of time but decompensate for various reasons, like discontinuing medication. Panelists described situations where their loved ones were resistant to treatment, and expressed frustration that, from their perspective, the only options were hospitals and jails. One parent asserted that it took going to court to get her daughter off the waitlist and into a treatment program.

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*"Most importantly, we all have to work together, to be open to partnerships, and understand one another and our different points of view." Debra Buckles, Chief of Forensic Services, Stanislaus County Behavioral Health and Recovery Services*

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Public safety panelists emphasized the need to address behavioral health and behavioral health-related needs, such as housing and employment, before involvement in the criminal justice system; once these individuals enter the system there is less flexibility. Law enforcement panelists asserted that policies such as AB109 and Propositions 47 and 57 have and will keep more offenders in the community and out of custody so it is imperative that the community be able to handle a possible increase in those that need mental health and substance use disorder services. They also stated that jails are not and should not be mental health facilities and supported more treatment in the community to prevent offending. Panelists recognized that departments should be working together but that everyone has their own role to play; a police officer's primary job is to enforce the law.

Panelists discussed the role of probation as an important partner in linking individuals with mental health needs to services and monitoring the access and utilization of services. A representative of probation described key challenges: high number of those with serious mental health needs; access to medications for those released on weekends or after hours; overlap of those with mental health needs and substance abuse; long waiting lists for appropriate housing; long-term treatment for mental health and substance use including follow-up to hold them accountable for their sobriety and recovery; lack of consistency with healthcare providers and the lack of trust with Telecare; and exchanging information with partners so everyone knows who is being released and what their roles are in that person's care.

### Stanislaus County Forensic System of Care

**Adult Drug Court:** This program provides Substance Use Disorder (SUD) treatment and aftercare services to individuals who are court ordered to treatment and on probation.

**Integrated Forensic Team - Community Corrections:** Located at the Day Reporting Center, the program provides comprehensive mental health services for individuals on probation (mandatory supervision). Services include case management, crisis response, housing and employment assistance, mental health rehabilitation, medication support, peer support and 24/7 coverage.

**Detention Services – Mental Health:** This program provides in custody mental health treatment services which include assessment, case management, individual therapy and group therapy.

**Detention Services – SUD In-Custody:** This program provides In custody Intensive Outpatient Treatment (IOT) Substance Use Disorder (SUD) treatment services. (Programs previously known as Men In Recovery and Women of Wisdom).

**Detention Services – Day Reporting Center:** This program provides Intensive Outpatient Treatment (IOT) Substance Use Disorder (SUD) treatment services to individuals primarily on probation.

**Integrated Forensics Team – MHSA:** This program provides comprehensive mental health and co-occurring services for adults (18 years and older) on probation and/or have frequent contact with law enforcement, underserved, homeless or at risk of homelessness and/or are frequent users of hospital and emergency room services. Services are also available to qualifying individuals coming out of state hospitals and some Drug Court participants with a co-occurring disorder. Services include case management, crisis response, family support, housing and employment assistance, mental health rehabilitation, medication support, peer support, and 24/7 coverage.

**Mental Health Court:** This program provides mental health services through the Integrated Forensics Team but accessed through the criminal justice system.

**Restoration to Competency:** This program provides services to mentally ill individuals who are determined by the courts to be incompetent to stand trial. Services include psychiatric treatment and instruction about the court process and various roles that play a part in the judicial system. The goal is to restore individuals to trial competency.

## Exploring the Criminal Justice/Mental Health Intersection Project

### Stanislaus County Community Forum Summary

Community forum participants argued that the demand for services exceeded current capacity to deliver those services. Participants discussed the need for supportive services and that those services must be comprehensive and address reintegration from custody to community, homelessness, substance use, in addition to mental health needs. Participants stressed the role of the family and how families, too, need support to navigate the system for their loved ones. Reducing stigma was discussed as a way to increase recognition of mental health symptoms early in onset.

Some of the participants who identified as family members wanted to see more follow-up with those who have been released out of custody and referred to services. Participants want to see more Full Service Partnership (FSP)-type services following release from hospital or jail. Participants discussed Welfare and Institution Code (WIC) Section 5150 holds, which allow for involuntary commitment up to 72 hours, and how that may not be enough time for stabilization and could contribute to the “revolving door” of incarceration. Participants expressed the need for more opportunities to engage with peers, or those with lived experience in both the mental health and criminal justice systems.

#### Community Priorities

Forum participants identified the following issues as most important to them: a continuum of care that focused on early intervention before criminal justice involvement; more capacity and resources for mental health services to meet the need; follow-through for outpatient services; a shared understanding of the problem and possible solutions; collaboration and sharing across agencies that collect data on the same person; focus on housing and how previously incarcerated individuals get reintegrated into the community through housing; case management to navigate community-based resources; crisis intervention training; and assisted outpatient treatment.

Panelists and participants alike discussed how culturally sensitive services must be prioritized. Panelists representing communities of color talked about how mental illness impacts those from non-English speaking communities as well as those from cultures that do not seek help from those outside their culture. Panelists asserted that service providers and administrators need to work in cooperation with diverse communities to identify culturally appropriate treatment and outreach strategies.

#### Community Impact

Participants identified ways in which the community could bring about change: education for family members and care-givers about signs and symptoms of mental illness to increase early identification and prevention law enforcement interaction; create a shared understanding of roles and responsibilities among service providers, including jail services; additional public meetings to engage stakeholders to discuss how to allocate resources; develop a “one-stop-shop” for those leaving jail to access community resources and assist with reintegration; promote more widespread use of crisis intervention training and collaboration between law enforcement and mental health; work with diverse communities to develop culturally competent approaches; and explore alternatives to dispatching police.

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*“Community is the first line.” Chief Galen Carroll, Modesto Police Department,  
describing the role of the community in keeping those with mental illness out of jail*

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Participants discussed the need for the community to better understand and expand upon existing prevention strategies across departments, especially those promoted by community-based organizations and law enforcement. Public safety panelists described efforts underway to expand education and awareness but stressed the importance of getting the family involved; recognizing signs of mental illness or substance use starts at home and in the schools. Participants acknowledged the essential role the community plays in keeping those most vulnerable from cycling in and out of the justice system.

### Stanislaus County Pre-Arrest Diversion Strategies

**Outreach and Engagement** – Staff dedicated to downtown area for county-wide outreach to homeless population. Staff focus on building rapport, assess needs and wants, and refer and link individuals to services.

**Crisis Intervention Training (CIT)** – Training is 40-hours, is offered twice a year and is offered to all law enforcement agencies in the county. The goals of the training are to reduce use-of-force incidents by officers; reduce related injuries to officers and citizens; reduce misdemeanor arrests among individuals with a serious mental illness; decrease the frequency and amount of time officers spend responding to calls for service; reduce involuntary psychiatric hospitalizations; and improve relationships between law enforcement, local behavioral health and other service providers, and consumers of behavioral health services and their families.

**Respite Center** – 6-bed facility, open 24 hours a day, seven (7) days a week, 365 days a year, situated in a residential neighborhood. Individuals served are either known or suspected to have significant mental health issues, are either homeless or at risk of homelessness, and at risk of incarceration, victimization, and /or psychiatric hospitalization. The majority of program referrals were initiated by the Modesto Police Department, Community Emergency Response Team (CERT) and Telecare Transition TRAC, and other BHRS contracted outreach and engagement programs.

**Restorative Policing** - This forensic, multi-disciplinary group meets to guide a community policing effort. The committee continues to meet monthly to discuss treatment or intervention options for individuals who have multiple police contacts and who have a serious mental illness and/or co-occurring substance abuse diagnosis. The purpose is to strategically intervene with the goal of "restoring" the individual to their community and decreasing the calls for service with law enforcement.

**Integrated Forensic Team** - Strategies include a multidisciplinary team that provides a "wrap around" approach that includes 24/7 access to a known service provider, individualized service planning, crisis stabilization alternatives to jail, re-entry support from a state hospital, and linkages to existing community support groups. Both service recipients and family members are offered education regarding the management of both mental health issues, benefits advocacy, and housing support.

**Homeless Outreach Program** - Provides culturally competent mental health services to adults ages 18 and above with serious mental illness and a history of homelessness. The HOP program provides a continuity of care and a menu of treatment options utilizing the Assertive Community Treatment (ACT) model. This variety of options supports individuals in all levels of their recovery while offering choice and flexibility to members and their families. All of the programs offer case management and psychiatric services at the core as well as 24/7 crisis intervention services.

### Next Steps

During this first project-related community forum, Commissioners and staff explored how one county is reducing the number of justice-involved adults with mental health needs, and engaged the community in a conversation about needs and gaps, priorities and how communities could help reduce the number of incarcerated persons with mental health needs. The next community forum is being planning in the Bay Area in April 2017.

For more information, including upcoming events, please visit [www.mhsoac.ca.gov](http://www.mhsoac.ca.gov).